



Last Updated: 03/09/2022

## **Modifications to the Virginia Medicaid Preferred Drug List (PDL) Program and PDL Quicklist & Termination of Automatic PDL Prior Authorizations for Long-Acting Narcotics: Effective July 1, 2006**

The purpose of this memorandum is to inform you of:

- Modifications to Virginia Medicaid's PDL (effective July 1, 2006); and
- Upcoming termination of automatic PDL prior authorization for Long-Acting Narcotics (effective July 1, 2006)

### **PREFERRED DRUG LIST UPDATES - EFFECTIVE JULY 1, 2006**

DMAS implemented the PDL program to provide clinically effective and safe drugs to its clients in a cost-effective manner. The PDL is a list of preferred drugs by therapeutic class for which the Medicaid program allows payment without requiring prior authorization (PA). In designated classes, drug products classified as non-preferred will be subject to PA. Other clinical criteria may also apply for each respective drug class. There are provisions for a 72-hour supply of necessary medications so that this initiative will not cause an individual to be without an appropriate and necessary drug therapy.

The PDL is effective for the Medicaid, MEDALLION, and FAMIS Plus fee-for-service populations. The PDL **does not** apply to recipients enrolled in a Managed Care Organization or to FAMIS enrollees. Your continued support of this program is critical to its success.



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DMAS implemented Phase II of the PDL in April and July of 2004 with 17 therapeutic drug classes. The Pharmacy & Therapeutics (P & T) Committee recently conducted its second annual review of the PDL Phase II drug classes and several changes were made to the preferred status of drugs in these classes.

The therapeutic classes included in the latest annual review of PDL Phase II were:

- Oral Hypoglycemics

- Second Generation  
Sulfonylureas  
Alpha-Glucosidase  
Inhibitors  
Biguanides

- Biguanide  
Combination  
Products  
Meglitinides

- Thiazolidinediones (TZDs)

- Leukotriene Modifiers
- Non-Steroidal Anti- Inflammatory Drugs (NSAID)
- Serotonin Receptor Agonists (Tryptans)
- Oral Antifungals for Onychomycosis
- Bisphosphonates for Osteoporosis
- Second Generation Cephalosporins (Antibiotics)
- Third Generation Cephalosporins (Antibiotics)
- Second Generation Quinolones – Systemic (Antibiotics)
- Third Generation Quinolones – Systemic (Antibiotics)
- Macrolides - Adult and Pediatric (Antibiotics)
- Antihyperkinesia/CNS Stimulants (Medications for ADD/ADHD)
- Alpha-2 Adrenergic - Ophthalmic
- Beta-blockers -Ophthalmic



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- Carbonic Anhydrase Inhibitors-Ophthalmic
- Prostaglandin Inhibitors -Ophthalmic
- Long-Acting Narcotics

The Pharmacy and Therapeutics Committee also deemed six new drug classes “PDL eligible” and those classes will be included with Phase II in the future. The six new drug classes subject to the PDL beginning July 1, 2006 include:

- Ophthalmic Anti-Inflammatory
- Ophthalmic Quinolones
- Ophthalmic Antihistamines
- Ophthalmic Mast Cell Stabilizers
- Herpes Antivirals
- Influenza

The Pharmacy and Therapeutics Committee also evaluated a new drug within a PDL Phase I drug class (Beta Adrenergics). Based on this review of Phase II drug classes, new drug classes, and the new drug in Phase I, effective July 1, 2006, the additions and changes to the PDL are as follows:

### **ADDITIONS AND CHANGES TO PREFERRED STATUS**

**Glimepiride** (Second Generation Sulfonylureas)

**Actoplus Met** (Thiazolidinediones -- TZDs)

**Glipizide/Metformin and Glyburide/Metformin** (Oral Hypoglycemics - Biguanides)

**Xopenex HFA** (Beta Adrenergics)



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**Acyclovir Tablet, Acyclovir Suspension, Valtrex, and Famvir** (Herpes Antivirals)

**Zaditor, Patanol, Elestat, and Optivar** (Ophthalmic Antihistamines)

**Vigamox, Ofloxacin Drops, Ciprofloxacin HCL Drops, Zymar and Quixin** (Ophthalmic Quinolones)

**Flurbiprofen Sodium, Voltaren Drops, Acular, Acular LS, Nevanac, and Xibrom**

(Ophthalmic Anti-Inflammatory)

**Amantadine HCL Syrup, Amantadine HCL Capsule, Rimantadine HCL, Relenza, Tamiflu Suspension and Tamiflu Capsule** (Influenza)

**Cromolyn Sodium Ophthalmic, Alocril, Alomide, and Alamast** (Ophthalmic Mast Cell Stabilizers)

## **ADDITIONS AND CHANGES TO NON-PREFERRED STATUS**

**Metaglip and Glucovance** (Oral Hypoglycemics - Biguanides) **Zovirax Tablet and Zovirax Suspension** (Herpes Antivirals) **Emadine** (Ophthalmic Antihistamines)

**Ocuflox Drops, Ciloxan Drops, and Ciloxan Ointment** (Ophthalmic Quinolones)

**Acular PF and Ocufen** (Ophthalmic Anti-Inflammatory) **Flumadine Tablet and Flumadine Syrup** (Influenza) **Crolom** (Ophthalmic Mast Cell Stabilizers)

The updated PDL Quicklist reflecting all changes is attached. Please note that the revised PDL Quicklist only includes “preferred” drugs (no PA required). If the drug requested is not on the list, a PA is required.

You may also access the complete list of pharmaceutical products included



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on the Virginia PDL by visiting <http://www.dmas.virginia.gov/pharm-home.htm> or <https://virginia.fhsc.com>. Additional information and Provider Manual updates will be posted as necessary. Comments regarding this program may be emailed to the P&T Committee at [pdlinput@dmas.virginia.gov](mailto:pdlinput@dmas.virginia.gov).

### **TERMINATION OF AUTOMATIC PDL PRIOR AUTHORIZATION FOR LONG- ACTING NARCOTICS - EFFECTIVE JULY 1, 2006**

With the implementation of Long-Acting Narcotics on the PDL in January 2005, many “automatic” prior authorizations were granted to recipients who were stabilized on these drugs and/or had certain diagnoses. The automatic PA allows an override of both the clinical and PDL

requirements, therefore, providing full access to these medications without clinical review. To date, the automatic PAs have not expired.

**Effective July 1, 2006, these automatic PAs for Long-Acting Narcotics will close. Those recipients for whom Long-Acting Narcotics remain medically necessary will require a new PA for these drugs. All affected recipients, together with their medical or pharmacy provider, will receive notification of this change. PAs for Long-Acting Narcotics granted within the past year (with specific termination dates) will not be affected.**

New claims for Long-Acting Narcotics require step therapy. The medically appropriate doctor should prescribe Short-Acting Narcotic therapy before any of the Long-Acting Narcotic drugs will be covered. With this method, Medicaid covers specific high-cost drugs only after clinically appropriate, proven, and more cost-effective Short-Acting Narcotics are attempted. If Short- Acting Narcotics do not provide the required therapeutic benefit,



Medicaid will cover a Long- Acting Narcotic.

A PA for a Long-Acting Narcotic drug will be granted without trial of a Short-Acting Narcotic prescription drug if specific medical criteria have been met. This approach ensures the appropriate use of medication in the most cost-effective manner. Those patients, who have received two recent trials of Short-Acting Narcotic in their drug history, will automatically be exempt from the step therapy requirements and will not need to request a PA through their doctor's office for a Preferred Long-Acting Narcotic drug.

This method is not required for new patients who need relief from moderate to severe pain that requires around-the-clock opioid therapy for an extended period. In other words, such patients can immediately bypass Short-Acting Narcotics for Long-Acting Narcotics if their condition warrants such treatment. However, these patients will still need to request a PA through their doctor's office. Once the step therapy clinical edit is satisfied, the Preferred Drug List (PDL) applies. The length of the PAs for Long-Acting Narcotics will be six months.

For more information on specific PA criteria for Long-Acting Narcotics, go to the DMAS website ([www.dmas.virginia.gov](http://www.dmas.virginia.gov)), click on "Pharmacy Services" in the left-hand column entitled "DMAS Content Menu," then click on "Preferred Drug List," and select "PDL Criteria."

## **PRIOR AUTHORIZATION (PA) PROCESS**

A message indicating that a drug requires a PA will be displayed at the point of sale (POS) when a non-preferred drug is dispensed. Pharmacists should contact the patient's prescribing provider to request that they initiate the PA process. Prescribers can initiate PA requests by letter, faxing the attached form to 1-800-932-6651, or contacting the First Health Services Clinical Call Center at 1-800-932-6648 (available 24 hours a day, seven days a week). Faxed and mailed PA requests will receive a response within 24 hours of receipt. PA requests can be mailed to:



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First Health Services  
Corporation ATTN: MAP  
Department/ VA Medicaid  
4300 Cox Road

Glen Allen, Virginia 23060

A copy of the PA form is available online at <http://www.dmas.virginia.gov/pharm-home.htm> or <https://virginia.fhsc.com>. The PDL criteria for PA purposes are also available on both websites.

## **PREFERRED DRUG LIST (PDL) - 72-HOUR-SUPPLY PROCESSING POLICY**

The PDL program provides a process where the pharmacist may dispense a 72-hour supply of a non-preferred, prescribed medication if the physician is not available to consult with the pharmacist (after hours, weekends, or holidays), **AND** the pharmacist, in his/her professional judgment consistent with current standards of practice, feels that the patient's health would be compromised without the benefit of the drug. A phone call by the pharmacy provider to First Health Services Corporation (FHSC) at 1-800-932-6648 (available 24 hours a day, seven days a week) is required for processing a 72-hour supply.

The patient will be charged a co-payment applicable for this 72-hour supply (partial fill). However, a co-payment will not be charged for the completion fill. The prescription must be processed as a "partial" fill and then a "completion" fill. For unit-of-use drugs (i.e., inhalers, drops, etc.), the entire unit should be dispensed and appropriate action taken to prevent similar situations in the future.



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## **PREFERRED DRUG LIST (PDL) - 72-HOUR-SUPPLY DISPENSING FEE PROCESS**

Pharmacy providers are entitled to an additional \$4.00 dispensing fee (brand name and generic drugs) when filling the completion of a 72-hour-supply prescription for a non-preferred drug. To receive the additional dispensing fee, the pharmacist must submit the 72-hour supply as a partial fill and, when submitting the claim for the completion fill, enter "03" in the "Level of Service" (data element 418-DI) field. The additional dispensing fee is only available (one time per prescription) to the pharmacist after dispensing the completion fill of a non-preferred drug when a partial (72-hour supply) prescription was previously filled.

Any questions regarding the PDL dispensing process can be referred to FHSC at 1-800-932- 6648 (available 24 hours a day, seven days a week).

## **PERSONAL DIGITAL ASSISTANT (PDA) DOWNLOAD FOR PDL QUICKLIST**

There are two ways to download the PDL list for PDA users. On the DMAS website ([www.dmas.virginia.gov](http://www.dmas.virginia.gov)), there is a link, which enables providers to download the PDL Quicklist to their PDAs. To access this link, please click on "Pharmacy Services," then

"Preferred Drug List," then "PDL Quicklist PDA Format." This page will have complete directions for the download and HotSync operations. If you are an ePocrates® user, you may also access Virginia Medicaid's PDL through the ePocrates® formulary link at [www.epocrates.com](http://www.epocrates.com). ePocrates® is a leading drug information software application for handheld computers (PDAs) and desktop computers. A large number of healthcare providers



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use this software in their daily practice. For more information and product registration, please visit the ePocrates® website.

To download the Virginia Medicaid PDL via the ePocrates® website to your PDA, please follow these steps:

1. Ensure that you have the most recent version of ePocrates Rx® installed on your PDA.
2. Connect to the Internet and go to [www.epocrates.com](http://www.epocrates.com).
3. Click the "Add Formularies" link at the top of the page.
4. Log in to the website using your user name and password.
5. Select "Virginia" from the "Select State" menu.
6. Select "Virginia Medicaid-PDL" under "Available Formularies."
7. Click on "Add to My List" and then click on "Done."
8. Auto Update your PDA to install the "Virginia Medicaid-PDL" to your PDA.

### **ELIGIBILITY AND CLAIMS STATUS INFORMATION**

DMAS offers a web-based Internet option (ARS) to access information regarding Medicaid or FAMIS eligibility, claims status, check status, service limits, prior authorization, and pharmacy prescriber identification. The website address to use to enroll for access to this system is <http://virginia.fhsc.com>. The MediCall voice response system will provide the same information and can be accessed by calling 1-800-884-9730 or 1-800-772-9996. Both options are available at no cost to the provider.

### **COPIES OF MANUALS**

DMAS publishes electronic and printable copies of its Provider Manuals and Medicaid Memoranda on the DMAS website at [www.dmas.virginia.gov](http://www.dmas.virginia.gov). Refer to the Provider Column to find Medicaid and SLH (State and Local Hospitalization Program) Provider Manuals or click on "Medicaid Memos to Providers" to view Medicaid Memoranda. The Internet is the most efficient means to receive and review current provider information. If you do not have access to the Internet or would like a paper copy of a manual, you can order it by contacting



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Commonwealth-Martin at 1-804-780-0076. A fee will be charged for the printing and mailing of the manuals and manual updates requested.

### **"HELPLINE"**

The "HELPLINE" is available to answer questions Monday through Friday from 8:30 a.m. to 4:30 p.m., except on state holidays. The "HELPLINE" numbers are:

1-804-786-6273	Richmond area and out-of-state long distance
1-800-552-8627	All other areas (in-state, toll-free long distance)

Please remember that the "HELPLINE" is for provider use only. Please have your Medicaid Provider Identification Number available when you call.

### **PROVIDER E-NEWSLETTER SIGN-UP**

DMAS is pleased to inform providers about the creation of a new Provider E-Newsletter. The intent of this electronic newsletter is to inform, communicate, and share important program information with providers. Covered topics will include upcoming changes in claims processing, common problems with billing, new programs or changes in existing programs, and other information that may directly affect providers. If you would like to receive the electronic newsletter, please sign up at [www.dmas.virginia.gov/pr-provider\\_newletter.asp](http://www.dmas.virginia.gov/pr-provider_newletter.asp).



Department of Medical Assistance Services  
600 East Broad Street  
Suite 1300  
Richmond, VA 23219

<https://dmas.virginia.gov>

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Please note that the Provider E-Newsletter is not intended to take the place of Medicaid Memoranda, Medicaid Provider Manuals, or any other official correspondence from DMAS.